

**Center for Educational Performance and Information  
MEIS Security Agreement to Access the  
Registry of Educational Personnel (REP) Application**

District Code: \_\_\_\_\_ ISD Code: \_\_\_\_\_

District Name: \_\_\_\_\_

**Step 1.** Name of the designated individual whom the Superintendent authorizes to submit the REP data for the district.

\_\_\_\_\_  
Name (type or print) Title

\_\_\_\_\_  
E-mail Address Phone Number

**Step 2.** For the authorized individual: If you already have an MEIS account, go to Step 4. Separate security agreements must be completed and faxed for each MEIS application (e.g., Single Record Student Database, School Code Master, School Infrastructure Database, Financial Information Database, Registry of Educational Personnel, Credential Data Exchange, Grants, Pupil Transportation). If you do not already have an MEIS account number, use Internet Explorer to access the Internet and go to the following URL: <http://www.michigan.gov/meis>.

**Step 3.** Click on the MEIS logo. On the next screen, click on "**Create an MEIS Account.**" There you will be instructed on how to create a new account.

**Step 4.** Once an MEIS account number is obtained, please enter the following requested information:

Authorized MEIS Account Number (e.g., A1234567): \_\_\_\_\_  
Authorized MEIS Account Login Name (e.g., smithjan): \_\_\_\_\_

Please complete the next line if you are replacing a formerly authorized individual. (*Check all boxes that apply.*)

\_\_\_\_\_  
Name of Formerly Authorized Individual MEIS Account Number MEIS Login Name

☐ Please remove this individual from the REP application (i.e., s/he is no longer responsible for the REP).

☐ Please close this individual's MEIS account (i.e., s/he is no longer employed by this district).

**Step 5.** For the authorized individual: *Please sign below.*

I agree to protect my user identification and password from unauthorized use. I understand all access under my user ID is my responsibility. I agree to comply with the requirements of the Privacy Act of 1974 governing records maintained on individuals. (You may view the Privacy Act of 1974 at [www.usdoj.gov/foia/privstat.htm](http://www.usdoj.gov/foia/privstat.htm).)

\_\_\_\_\_  
Signature of Individual to be Authorized Date

**Step 6.** For the Superintendent Officer: *Please sign below.*

I attest that the above-named individual is authorized by me to submit REP data to the Michigan Education Information System for my district, and that the data are current and accurate.

\_\_\_\_\_  
Name of District/Agency

\_\_\_\_\_  
Signature of Superintendent Date

**Step 7.** Mail or fax this form to:

**DIT Client Service Center  
235 S. Grand, Suite 304  
Lansing, Michigan 48913  
Fax #: (517) 241-8439  
E-mail: [Help-Desk@michigan.gov](mailto:Help-Desk@michigan.gov)**